

# Weatherly Area School District

## REGISTRATION FORM (Please Print)

Copy to: ☐ Child Accounting  
☐ Guidance Counselor  
☐ Nurse  
☐ Transportation  
☒ Special Ed (If appl.)

### FOR OFFICE USE ONLY:

Building	20	Grade	7	Homeroom	
Entry Date	5-22-12	Day #	171	Entry Code	R-4
Student ID	3754			Out of District Placement	
PA Secure ID				Homeless	

Bus #	Stop #	Run#	Pick Up Time
-------	--------	------	--------------

Birthdate Verification:	BC <input checked="" type="checkbox"/>	Bapt.	Hosp. Registration	Verified by:
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Date Completed 5-16-12

Student Name R S  
 Last First Middle

Student Date of Birth

Student Address 320 Yeakle St Weatherly PA

Mailing Address (if different)

Home Phone ( ) Cell

Student Resides With Parents Relationship Mom + Dad

Please provide the following for federal and state reporting regulations:

- |                                  |                                   |
|----------------------------------|-----------------------------------|
| 1) City of Birth <u>Kingston</u> | 2) State of Birth <u>PA</u>       |
| 3) Country of Birth <u>U.S.</u>  | 4) SS Number                      |
| 5) Grade 9 Entry Date            | 6) US Entry Date                  |
| 7) Date First attend K-12 in PA  | 8) Date First attend K-12 in WASD |
| 9) ELL                           |                                   |

Sex (Check One): Male ☐ Female ☐

For state and federal reporting requirements, use the following definitions:

Select Primary Ethnicity (Choose One): ☐ Hispanic/Latino (any race)  
☒ Non-Hispanic/Latino (any race)

Race (Choose one or more, regardless of ethnicity): ☐ Amer Ind/Alaska Native ☐ Asian ☐ Pacific Islander  
☒ Caucasian/White ☐ Black/African American

Exhibit A

## PARENT/EMERGENCY INFORMATION

## Father

Address <sup>Last</sup> 320 <sup>First</sup> Yackie <sup>Middle</sup> St Weatherly <sup>Middle</sup> PA  
 Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work Phone \_\_\_\_\_

## Mother

Address <sup>Last</sup> 320 <sup>First</sup> Yackie <sup>Middle</sup> St Weatherly <sup>Middle</sup> PA <sup>Maiden</sup>  
 Home Phone \_\_\_\_\_ Cell ( ) \_\_\_\_\_ Work Phone \_\_\_\_\_

## Emergency Contact

Relationship \_\_\_\_\_  
 Address \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work Phone \_\_\_\_\_

To whom may the student be released? mom or Dad.

Please answer the following questions:

1) Are you the student's natural parent? YES X NO \_\_\_\_\_  
 If no, what is the relationship to the student? \_\_\_\_\_

2) Is the student court-ordered into any of the following?

Guardianship (1302) \_\_\_\_\_ Foster Care (1305) \_\_\_\_\_ Group Home (1306) \_\_\_\_\_  
 Long-Term Care \_\_\_\_\_ Independent Living \_\_\_\_\_ Emergency Shelter Care \_\_\_\_\_

If the student is under court-order, provide the following information from the court-order. Letter from placing agency should be provided if available.

a) Who has custody? \_\_\_\_\_

Court order attached for dependency/Guardianship (not required except in cases of divorce/separation arrangements) YES \_\_\_\_\_ NO \_\_\_\_\_

b) Who has guardianship? \_\_\_\_\_

c) Who has educational rights? \_\_\_\_\_

3) Is the guardian receiving payment for providing home for child? YES \_\_\_\_\_ NO X

4) Is the student in non-court ordered emergency shelter care? YES \_\_\_\_\_ NO X

5) Is the student in an informal foster care setting? YES \_\_\_\_\_ NO X

If yes, name the guardian: \_\_\_\_\_

Affidavit on file: YES \_\_\_\_\_ NO X

# PERSONAL INFORMATION

List all persons residing in the same household as the student registering (Brothers, Sisters)

Name	Birthdate
H L	
C R	
S R	

List all other individuals residing in your household (grandparents, aunts, uncles, friends, etc.)

Name	Birthdate

## EDUCATION INFORMATION - To Be Completed by Parent

1) What is the current educational placement grade for the student? 7

Please provide copy of report card from most recent educational placement

Copy Attached: YES \_\_\_\_\_ NO X

2) Is the student identified as a student with special needs and being served with an Individualized Education Plan? YES X NO \_\_\_\_\_

3) Date of most recent IEP \_\_\_\_\_ Copy Attached: YES \_\_\_\_\_ NO \_\_\_\_\_

4) Beginning with the most recent, list in order *all* previous schools that the student has attended:

Name of School District	Name of School	Approximate Date
Freeland Elem		K - 7 <sup>th</sup>

5) Has the student previously attended school in WASD? YES \_\_\_\_\_ NO X

If yes, list grade(s) \_\_\_\_\_

## PART FOUR: GUARDIAN IDENTIFICATION AND RESIDENCE VERIFICATION

Identification **must** be presented at time of registration. Parents must provide driver's license, PA ID card, or Automobile Registration indicating district residence. Guardian must provide copy of legal guardianship with educational rights. If guardian does not have legal custody, the parent must be present to sign with identification.

Type of Identification: \_\_\_\_\_ Copy attached (Check One): YES \_\_\_\_\_ NO \_\_\_\_\_

The purpose of this request is to assure that the educational resources of the Weatherly Area School District are properly and legally allocated. Falsification of any information or document required for residence verification or the use of the address of another person may result in revocation of student enrollment. **In addition to the above, at least one of the following document(s) must be presented:**

deed, mortgage, lease agreement or moving permit	<input checked="" type="checkbox"/>
utility bills (does not include cell phone bill)	<input type="checkbox"/>
check stubs from wages, public assistance or social security	<input type="checkbox"/>
payment or liability of payment of municipal and school district taxes	<input type="checkbox"/>
Any other relevant documents asked for by administration	<input type="checkbox"/>

Signature of Parent/Guardian C. R.

Signature of Agency Representative \_\_\_\_\_

Signature of Student \_\_\_\_\_  
(18 years or older/Emancipated)

Signature of Building Principal Amanda Pawick Date 5/16/2012

WEATHERLY AREA SCHOOL DISTRICT  
602 SIXTH STREET  
WEATHERLY, PENNSYLVANIA 18255

PARENTAL REGISTRATION STATEMENT

Student Name S. R.  
Date of Birth 5-24-99 Grade 7<sup>th</sup>  
Parent or Guardian Name C. R.  
Address 320 Yeakle St Weatherly PA  
Telephone Number \_\_\_\_\_

Pennsylvania School Code Section 13-1304-A states in part "Prior to admission to any school entity, the parent, guardian or other person having control or charge of a student shall, upon registration, provide a sworn statement or affirmation stating whether the pupil was previously suspended or expelled from any public or private school of this commonwealth or any other state for an act of offense involving weapons, alcohol or drugs, or for the wilful infliction of injury to another person or for any act of violence committed on school property.

Please complete the following:

I hereby swear or affirm that my child was \_\_\_\_\_ was not X previously suspended or expelled from any public or private school of this Commonwealth or any other state for an act or offense involving Weapons, alcohol or drugs, or for the wilful infliction of injury to another person or for any act of violence committed on school property.\* I make this statement subject to the penalties of 24 P.S. Section 13-1304-A(b) and 18 Pa. C.S.A. Section 4904, relating to unsworn falsification to authorities, and the facts contained herein are true and correct to the best of my knowledge, information and belief.

C. R.  
(Signature of Parent or Guardian)  
5-16-12  
(Date)

\* Name of the school from which student was suspended or expelled; reason for suspension/expulsion; and dates of suspension or expulsion. (optional)

Any wilful false statement made above shall be a misdemeanor of the third degree. This form shall be maintained as part of the student's disciplinary record.

### LEASE AGREEMENT

THIS LEASE AGREEMENT (hereinafter referred to as the "Agreement") made and entered into this 15 day of May, 2012, by and between Woonsocket, RI 02896, whose address is 501 E. School St. (hereinafter referred to as "Lessor") and Hi (hereinafter referred to as "Lessee").

### WITNESSETH:

WHEREAS, Lessor is the fee owner of certain real property being, lying and situate in Carbon County, Pennsylvania, such real property is having a street address of 320 Yeakle St. Weatherly, PA. 18301.

WHEREAS, Lessor is desirous of leasing the Premises to Lessee upon the terms and conditions as contained herein; and

WHEREAS, Lessee is desirous of leasing the Premises from Lessor on the terms and conditions as contained herein;

NOW, THEREFORE, for and in consideration of the sum of TEN DOLLARS (\$10.00), the covenants and obligations contained herein and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties hereto hereby agree as follows:

1. TERM. Lessor leases to Lessee and Lessee leases from Lessor the above described Premises together with any and all appurtenances thereto, for a term of Two year(s), such term beginning on 05/15/2012, and ending at 12 o'clock midnight on 05/14/2014.

2. RENT. The total rent for the term hereof is the sum of N/A DOLLARS (\$ N/A ). In lieu of rent the Lessee agrees upon taking care of the property (minor repairs and taking care of the lawn, cutting the grass, snow removal). The home owner will provide or reimburse for materials if and when necessary, upon documentation with receipts. These repairs shall be made to Lessor at the address as set forth in the preamble to this Agreement on or before the due date and without demand.

3. DAMAGE DEPOSIT. Upon the due execution of this Agreement, Lessee shall deposit with Lessor the sum of N/A DOLLARS (\$ 0 ) receipt of which is hereby acknowledged by Lessor, as security for any damage caused to the Premises during the term hereof. Such deposit shall be returned to Lessee, without interest, and it is any set off for damages to the Premises upon the termination of this Agreement.

4. USE OF PREMISES. The Premises shall be used and occupied by Lessee and Lessee's immediate family, exclusively, as a private single family dwelling, and no part of the Premises shall be used at any time during the term of this Agreement by Lessee for the purpose of carrying on any business, profession, or trade of any kind, or for any purpose other than as a private single family dwelling. Lessee shall not allow any other person, other than Lessee's immediate family or transient relatives and friends who are guests of Lessee, to use or occupy the Premises without first obtaining Lessor's written consent to such use. Lessee shall comply with any and all laws, ordinances, rules and orders of any and all governmental or quasi-governmental authorities affecting the cleanliness, use, occupancy and preservation of the Premises.

5. CONDITION OF PREMISES. Lessee stipulates, represents and warrants that Lessee has examined the Premises, and that they are at the time of this Lease and agrees to rent it in the as is condition.

6. ASSIGNMENT AND SUB-LETTING. Lessee shall not assign this Agreement, or sub-let or grant any license to use the Premises or any part thereof without the prior written consent of Lessor. A consent by Lessor to one such assignment, sub-letting or license shall not be deemed to be a consent to any subsequent assignment, sub-letting or license. An assignment, sub-letting or license without the prior written consent of Lessor or an

Exhibit B

assignment or sub-letting by operation of law shall be absolutely null and void and shall, at Lessor's option, terminate this Agreement.

7. ALTERATIONS AND IMPROVEMENTS. Lessee shall not make the repairs or improvements on the Premises or construct any building or make any other improvements on the Premises without the prior consent of Lessor. Any and all alterations, changes, and/or improvements built, constructed or placed on the Premises by Lessee shall, be and become the property of Lessor and remain on the Premises at the expiration or earlier termination of this Agreement.

8. TERMINATION OF THE AGREEMENT. In the event Lessor OR Lessee want to terminate the agreement a thirty (30) days notice must be provided. At that time both parties can void this contract.

9. HAZARDOUS MATERIALS. Lessee shall not keep on the Premises any item of a dangerous, flammable or explosive character that might unreasonably increase the danger of fire or explosion on the Premises or that might be considered hazardous or extra hazardous by any responsible insurance company.

10. UTILITIES. Lessor shall be responsible for arranging for and paying for all utility services required on the Premises, materials, and taxes for the property.

11. MAINTENANCE AND REPAIR; RULES. Lessee will keep and maintain the Premises and appurtenances in and repair during the term of this Agreement and any renewal thereof. Lessee will not hold the Lessor responsible for any accidents which may occur at the time of repairs. Lessee will be responsible to carry Liability Insurance.

12. SUBORDINATION OF LEASE. This Agreement and Lessee's interest hereunder are and shall be subordinate, junior and inferior to any and all mortgages, liens or encumbrances now or hereafter placed on the Premises by Lessor, all advances made under any such mortgages, liens or encumbrances (including, but not limited to, future advances), the interest payable on such mortgages, liens or encumbrances and any and all renewals, extensions or modifications of such mortgages, liens or encumbrances.

13. DEFAULT. If Lessee fails to comply with any of the material provisions of this Agreement, other than the covenant to pay rent, or of any present rules and regulations or any that may be hereafter prescribed by Lessor, or materially fails to comply with any duties imposed on Lessee by statute, within thirty (30) days after delivery of written notice by Lessor specifying the non-compliance and indicating the intention of Lessor to terminate the lease by reason thereof, Lessor may terminate this Agreement.

14. ABANDONMENT. If at any time during the term of this Agreement Lessee abandons the Premises or any part thereof, Lessor may, at Lessor's option, obtain possession of the Premises in the manner provided by law, and without becoming liable to Lessee for damages or for any payment of any kind whatever.

15. ATTORNEYS' FEES. Should it become necessary for Lessor to employ an attorney to enforce any of the conditions or covenants hereof, including the collection of rentals or gaining possession of the Premises, Lessee agrees to pay all expenses so incurred, including a reasonable attorneys' fee.

16. RECORDING OF AGREEMENT. Lessee shall not record this Agreement on the Public Records of any public office. In the event that Lessee shall record this Agreement, this Agreement shall, at Lessor's option, terminate immediately and Lessor shall be entitled to all rights and remedies that it has at law or in equity.

17. GOVERNING LAW. This Agreement shall be governed, construed and interpreted by, through and under the laws of the State of Pennsylvania.

18. SEVERABILITY. If any provision of this Agreement or the application thereof shall, for any reason and to any extent, be invalid or unenforceable, neither the remainder of this Agreement nor the application of the provision to other persons, entities or circumstances shall be affected thereby, but instead shall be enforced to the maximum extent permitted by law.



19. BINDING EFFECT. The covenants, obligations and conditions herein contained shall be binding on and inure to the benefit of the heirs, legal representatives, and assigns of the parties hereto.

20. MODIFICATION. The parties hereby agree that this document contains the entire agreement between the parties and this Agreement shall not be modified, changed, altered or amended in any way except through a written amendment signed by all of the parties hereto.

IN WITNESS WHEREOF, the parties have caused these presents to be duly executed:

As to Lessor this 15 day of May, 2012.

Witnesses: "Lessor"

Quica Duran

As to Lessee this 15 day of May, 2012

Witnesses: "Lessee"

TH B

# WEATHERLY AREA ELEMENTARY SCHOOL

Thomas McLaughlin  
Superintendent



Sandra Slavick  
Elementary School Principal

Home of the Wreckers

July 5, 2012

Dear Mr. and Mrs. R. \_\_\_\_\_

On May 22 of 2012, you registered your \_\_\_\_\_ son R. \_\_\_\_\_ under the guise that \_\_\_\_\_ was soon to reside in Weatherly Area School District. The story that was shared with the office was that your family was fixing up the house at 320 Yeakle Street, Weatherly, PA 18255. The Weatherly Area School District needs more proof that you are indeed residing at this address. This proof must be provided by August 1, 2012 if S. \_\_\_\_\_ wishes to continue to attend Weatherly Elementary/Middle School.

Respectfully,

Sandra B. Slavick

File copy

# *Weatherly Area School District*

Thomas W. McLaughlin  
Superintendent

David J. Marsiglio, CPA  
Business Manager/Secretary, Bd. of Education

December 11, 2012

Mr. & Mrs. H. R.

Dear Mr. & Mrs. R.

On December 11, 2012, I spoke to you by telephone regarding the residency of your son. You stated in our conversation that you are residing at the above address.

In order for your son to attend the Weatherly Area School District, he must reside within the district boundaries. Your current address is outside the district boundaries and your son should be attending the Hazleton Area School District.

You will need to withdraw your son from our district by December 21, 2012. After this date, he will no longer be considered a Weatherly Area School District student. Once he is enrolled in the Hazleton Area School District, we will forward all of his records.

Sincerely,

*Thomas W. McLaughlin*

Thomas W. McLaughlin  
Superintendent

TWM;tmb

602 Sixth Street  
Weatherly, PA 18255

Administrative Office Phone: 570-427-8681  
Administrative Fax: 570-427-8918

Exhibit D

# Weatherly Area School District

Thomas W. McLaughlin  
Superintendent

David J. Marsiglio, CPA  
Business Manager/Secretary, Bd. of Education

January 3, 2013

Mr. & Mrs. H R

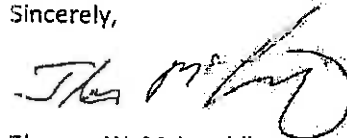
Dear Mr. & Mrs. R:

On January 2, 2013, I left a message on your voice mail regarding the residency of your son. I advised you that son needed to enroll in district of residence.

Your current address is outside the district boundaries and your son should be attending the Hazleton Area School District.

As of today, January 3, 2013 son is no longer a student in the Weatherly Area School District and will not be permitted to attend classes here. Once son is enrolled in the Hazleton Area School District, we will forward all of son's records.

Sincerely,



Thomas W. McLaughlin  
Superintendent

TWM;tmb

9999 0094 9000 0515 2007

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only, No Insurance Coverage Provided)	
For delivery status, mail history and other information, visit <a href="http://www.usps.com">www.usps.com</a>	
OFFICIAL USE	
Postage	\$ 4.50
Certified Fee	\$ 2.75
Return Receipt Fee (Endorsement Required)	\$ 3.35
Restricted Delivery Fee (Endorsement Required)	\$ 0.00
Total Postage & Fees	\$ 10.60

Sent to: Mr. & Mrs. H R

Street, Apt., Box, or PO Box No. \_\_\_\_\_

City, State, ZIP+4 \_\_\_\_\_

Postmark Here

602 Sixth Street  
Weatherly, PA 18255

Office Phone: 570-427-8681  
Administrative Fax: 570-427-8918

Exhibit E

# Weatherly Area School District

## REGISTRATION FORM (Please Print)

Copy to: ☐ Child Accounting  
☐ Guidance Counselor  
☐ Nurse  
☐ Transportation  
☐ Special Ed (if appl.)

**FOR OFFICE USE ONLY:**

Building		Grade		Homeroom	
Entry Date		Day #		Entry Code	
Student ID				Out of District Placement	
PASecureID				Homeless	

Bus #	Stop #	Run#	Pick Up Time
-------	--------	------	--------------

Birthdate Verification:	BC	Bapt.	Hosp. Registration	Verified by:
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Date Completed 1-7-13

Student Name R S  
Last First Middle

Student Date of Birth \_\_\_\_\_

Student Address 320 yarker st Weatherly PA

Mailing Address (if different) \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_

Student Resides With C, JH Relationship parents

Please provide the following for federal and state reporting regulations:

- 1) City of Birth Kingston PA 2) State of Birth PA  
 3) Country of Birth USA 4) SS Number \_\_\_\_\_  
 5) Grade 9 Entry Date 2014 6) US Entry Date \_\_\_\_\_  
 7) Date First attend K-12 in PA 2009 8) Date First attend K-12 in WASD \_\_\_\_\_  
 9) ELL \_\_\_\_\_

Sex (Check One): Male ☐ Female ☐

For state and federal reporting requirements, use the following definitions:

Select Primary Ethnicity (Choose One): ☐ Hispanic/Latino (any race)  
☒ Non-Hispanic/Latino (any race)

Race (Choose one or more, regardless of ethnicity): ☐ Amer Ind/Alaska Native ☐ Asian ☐ Pacific Islander  
☒ Caucasian/White ☐ Black/African American

Exhibit F

## PARENT/EMERGENCY INFORMATION

**Father** R H   
Last First Middle  
 Address 320 Yeakel St  
 Home Phone  Cell  Work Phone

**Mother** R C   
Last First Middle Maiden  
 Address 320 Yeakel St  
 Home Phone  Cell  Work Phone

**Emergency Contact**     
Last First Middle  
 Relationship   
 Address   
 Home Phone  Cell  Work Phone

To whom may the student be released? H C

Please answer the following questions:

1) Are you the student's natural parent? YES X NO

If no, what is the relationship to the student?

2) Is the student court-ordered into any of the following?

Guardianship (1302)  Foster Care (1305)  Group Home (1306)   
 Long-Term Care  Independent Living  Emergency Shelter Care

If the student is under court-order, provide the following information from the court-order. Letter from placing agency should be provided if available.

a) Who has custody?

Court order attached for dependency/Guardianship (not required except in cases of divorce/separation arrangements) YES  NO

b) Who has guardianship?

c) Who has educational rights?

3) Is the guardian receiving payment for providing home for child? YES  NO

4) Is the student in non-court ordered emergency shelter care? YES  NO

5) Is the student in an informal foster care setting? YES  NO

If yes, name the guardian:

Affidavit on file:

YES  NO

## CENSUS INFORMATION

List all persons residing in the same household as the student registering (Brothers, Sisters)

Name	Birthdate
A. R	
C R	
S R	

List all other individuals residing in your household (grandparents, aunts, uncles, friends, etc.)

Name	Birthdate

## EDUCATIONAL INFORMATION - To be completed by Parent

- 1) What is the current educational placement grade for the student? 8<sup>th</sup>  
 Please provide copy of report card from most recent educational placement  
 Copy Attached: YES \_\_\_\_\_ NO \_\_\_\_\_
- 2) Is the student identified as a student with special needs and being served with an Individualized Education Plan? YES \_\_\_\_\_ NO \_\_\_\_\_
- 3) Date of most recent IEP \_\_\_\_\_ Copy Attached: YES \_\_\_\_\_ NO \_\_\_\_\_
- 4) Beginning with the most recent, list in order *all* previous schools that the student has attended:

Name of School District	Name of School	Approximate Date
Freeland Elm	Hazleton	

- 5) Has the student previously attended school in WASD? YES \_\_\_\_\_ NO X
- If yes, list grade(s) \_\_\_\_\_



## PARENT/GUARDIAN IDENTIFICATION AND RESIDENCY VERIFICATION

Identification **must** be presented at time of registration. Parents must provide driver's license, PA ID card, or Automobile Registration indicating district residence. Guardian must provide copy of legal guardianship with educational rights. If guardian does not have legal custody, the parent must be present to sign with identification.

Type of Identification: \_\_\_\_\_ Copy attached (Check One): YES X NO \_\_\_\_\_

The purpose of this request is to assure that the educational resources of the Weatherly Area School District are properly and legally allocated. Falsification of any information or document required for residence verification or the use of the address of another person may result in revocation of student enrollment. **In addition to the above, at least one of the following document(s) must be presented:**

deed, mortgage, lease agreement or moving permit	<u>X</u>
utility bills (does not include cell phone bill)	
check stubs from wages, public assistance or social security	
payment or liability of payment of municipal and school district taxes	
Any other relevant documents asked for by administration	

Signature of Parent/Guardian C. R. \_\_\_\_\_

Signature of Agency Representative \_\_\_\_\_

Signature of Student \_\_\_\_\_  
(18 years or older/Emancipated)

Signature of Building Principal \_\_\_\_\_ Date \_\_\_\_\_

☒ COMMONWEALTH OF PENNSYLVANIA  
DRIVER'S LICENSE UPDATE

SEX HEIGHT EYES SOCIAL SECURITY NUMBER  
M 6'00 BRO \*\*\* \*\* \*\*  
DRIVER ID NUMBER BIRTH DATE DURS

EXPIRATION DATE CLASSES ENDORSEMENTS  
02 19 15 C

ISSUE DATE COMMERCIAL / MEDICAL RESTRICTIONS  
010813 \*/\*

H R  
320 YEAKLE ST PA 18255  
WEATHERLY

1H P  
000000  
13008-7928-17296-8-002

☒ COMMONWEALTH OF PENNSYLVANIA  
DRIVER'S LICENSE UPDATE

SEX HEIGHT EYES SOCIAL SECURITY NUMBER  
F 5'06 BRO \*\*\* \*\* \*\*  
DRIVER ID NUMBER BIRTH DATE DURS

EXPIRATION DATE CLASSES ENDORSEMENTS  
07 06 13 C

ISSUE DATE COMMERCIAL / MEDICAL RESTRICTIONS  
010813 \*/\*

C R  
320 YEAKLE ST PA 18255  
WEATHERLY

C A  
000000  
13008-7928-17295-6-002

Exhibit 6

**HOME LANGUAGE SURVEY\***

The Office of Civil Rights (OCR) requires that school districts/charter schools/full day AVTS identify limited English proficient (LEP) students in order to provide appropriate language instructional programs for them. Pennsylvania has selected the Home Language Survey as the method for the identification.

**School District:****School:****Date:****Student's Name:****Grade:**

1. What is/was the student's first language? english

2. Does the student speak a language(s) other than English?  
(Do not include languages learned in school.)

☐ Yes ☒ No

If yes, specify the language(s): \_\_\_\_\_

3. What language(s) is/are spoken in your home? english

4. Has the student attended any United States school in any 3 years during his/her lifetime?

☒ Yes ☐ No

If yes, complete the following:

Name of School	State	Dates Attended
<u>Freeland Elm</u>	<u>PA</u>	<u>95 - now</u>
_____	_____	_____
_____	_____	_____

Person completing this form (if other than parent/guardian):

Parent/Guardian signature:

\*The school district/charter school/full day AVTS has the responsibility under the federal law to serve students who are limited English proficient and need English instructional services. Given this responsibility, the school district/charter school/full day AVTS has the right to ask for the information it needs to identify English Language Learners (ELLs). As part of the responsibility to locate and identify ELLs, the school district/charter school/full day AVTS may conduct screenings or ask for related information about students who are already enrolled in the school as well as from students who enroll in the school district/charter school/full day AVTS in the future.

WEATHERLY AREA SCHOOL DISTRICT  
602 SIXTH STREET  
WEATHERLY, PENNSYLVANIA 18255

PARENTAL REGISTRATION STATEMENT

Student Name S. R.  
Date of Birth \_\_\_\_\_ Grade 8  
Parent or Guardian Name C. R.  
Address 320 Yeaker St Weatherly  
Telephone Number \_\_\_\_\_

Pennsylvania School Code Section 13-1304-A states in part "Prior to admission to any school entity, the parent, guardian or other person having control or charge of a student shall, upon registration, provide a sworn statement or affirmation stating whether the pupil was previously suspended or expelled from any public or private school of this commonwealth or any other state for an act of offense involving weapons, alcohol or drugs, or for the wilful infliction of injury to another person or for any act of violence committed on school property.

Please complete the following:

I hereby swear or affirm that my child was \_\_\_\_\_ was not \_\_\_\_\_ previously suspended or expelled from any public or private school of this Commonwealth or any other state for an act or offense involving Weapons, alcohol or drugs, or for the wilful infliction of injury to another person or for any act of violence committed on school property.\* I make this statement subject to the penalties of 24 P.S. Section 13-1304-A(b) and 18 Pa. C.S.A. Section 4904, relating to unsworn falsification to authorities, and the facts contained herein are true and correct to the best of my knowledge, information and belief.

C. R.  
(Signature of parent or guardian)  
1-7-13  
(Date)

\* Name of the school from which student was suspended or expelled; reason for suspension/expulsion; and dates of suspension or expulsion. (optional)

Any wilful false statement made above shall be a misdemeanor of the third degree. This form shall be maintained as part of the student's disciplinary record.

# *Weatherly Area School District*

**Thomas W. McLaughlin**  
*Superintendent*

**David J. Marsiglio, CPA**  
*Business Manager/Secretary, Bd. of Education*

February 26, 2013

Mr. & Mrs. H R

Dear Mr. & Mrs. R:

On February 12, 2013, the Weatherly Area School District sent a letter to the Yeakle Street address where you claim to be residing. That letter was returned to our district on February 15, 2013 with a notice that the house is vacant.

Your current address is outside the district boundaries and your should be attending the Hazleton Area School District.

As of today, February 26, 2013 is no longer a student in the Weatherly Area School District and will not be permitted to attend classes here. Once is enrolled in the Hazleton Area School District, we will forward all of records.

Sincerely,



Thomas W. McLaughlin  
Superintendent

TWM;tmb

# *Weatherly Area School District*

**Thomas W. McLaughlin**  
*Superintendent*

**David J. Marsiglio, CPA**  
*Business Manager/Secretary, Bd. of Education*

March 28, 2013

Mr. & Mrs. H     R  
320 Yeakle St.  
Weatherly, Pa. 18255

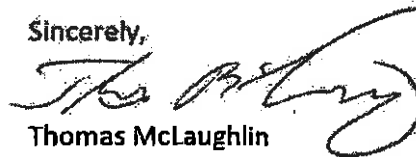
Dear Mr. & Mrs. R

On February 26, 2013, you received notice that your     S     was no longer a student in the Weatherly Area School District.

If this information has changed and you are now living at the above address, you will need to register your     into our district.

Registration takes place in our high school building. Our high school secretary will need all of the required registration paperwork. The high school number is 570-427-8521.

Sincerely,



Thomas McLaughlin  
Superintendent

AFFIDAVIT OF H R

COMMONWEALTH OF PENNSYLVANIA :

COUNTY OF ~~CARBON~~ LUZERNE :

I, H R being duly sworn, hereby state as follows:

1. I am currently living at 320 Yeakle Street in the Borough of Weatherly, Pennsylvania.
2. I reside there with my S R . D.O.B.
3. I have previously provided supplemental proof of my residency in the form of Lease agreement for 320 Yeakle St  
Driver's License  
S Birth Cert and Immunisation Records
4. I attest under penalty of perjury that my child and I currently live at this address on a full-time basis and that we intend to retain residency at this address in the Weatherly Area School District throughout this school year and for the foreseeable future.

H R  
H R

Sworn to and subscribed

before me this 2 day

of APRIL, 2013.

Betty Ann Marchetti  
NOTARY PUBLIC

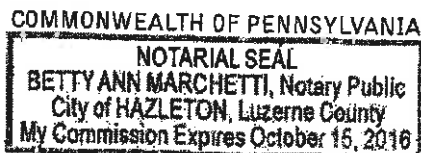


Exhibit J

**Weatherly Area School District****REGISTRATION FORM (Please Print)**

Copy to: ☐ Child Accounting  
☐ Guidance Counselor  
☐ Nurse  
☐ Transportation  
☐ Special Ed (if appl.)

**FOR OFFICE USE ONLY:**

Building	<u>Middle School</u>	Grade	<u>8</u>	Homeroom	<u>8-C</u>	<u>8-1 Jean</u>
Entry Date	<u>4/1/13</u>	Day #	<u>138</u>	Entry Code	<u>PA</u>	
Student ID	<u>3754</u>			Out of District Placement		
PASecureID	<u>5940375715</u>			Homeless		

Bus #	<u>9-2 AM</u> <u>2-2 PM</u>	Stop #		Run#		Pick Up Time	
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Birthdate Verification:	BC	Bapt.	Hosp. Registration	Verified by:
-------------------------	----	-------	--------------------	--------------

Date Completed 4-2-13

Student Name R. S.  
 Last First Middle

Student Date of Birth \_\_\_\_\_

Student Address 320 Yakile St Weatherly

Mailing Address (if different) \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell ( ) \_\_\_\_\_

Student Resides With Parents Relationship \_\_\_\_\_

Please provide the following for federal and state reporting regulations:

- 1) City of Birth Kingston PA 2) State of Birth PA  
 3) Country of Birth Luzerne 4) SS Number \_\_\_\_\_  
 5) Grade 9 Entry Date 2014 6) US Entry Date \_\_\_\_\_  
 7) Date First attend K-12 in PA \_\_\_\_\_ 8) Date First attend K-12 in WASD \_\_\_\_\_  
 9) ELL \_\_\_\_\_

Sex (Check One): Male \_\_\_\_\_ Female \_\_\_\_\_

For state and federal reporting requirements, use the following definitions:

Select Primary Ethnicity (Choose One): ☐ Hispanic/Latino (any race)  
☐ Non-Hispanic/Latino (any race)

Race (Choose one or more, regardless of ethnicity): ☐ Amer Ind/Alaska Native ☐ Asian ☐ Pacific Islander  
☒ Caucasian/White ☐ Black/African American

Exhibit K



## PARENT/EMERGENCY INFORMATION

Father P H  
 Address 320 Yakel St Last First Middle  
 Home Phone \_\_\_\_\_ II \_\_\_\_\_ Work Phone \_\_\_\_\_

Mother R C  
 Address \_\_\_\_\_ Last First Middle Maiden  
 Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_  
 Relationship \_\_\_\_\_ Last First Middle  
 Address \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work Phone \_\_\_\_\_

To whom may the student be released? NO ONE

Please answer the following questions:

1) Are you the student's natural parent? YES X NO \_\_\_\_\_  
 If no, what is the relationship to the student? \_\_\_\_\_

2) Is the student court-ordered into any of the following?

Guardianship (1302) \_\_\_\_\_ Foster Care (1305) \_\_\_\_\_ Group Home (1306) \_\_\_\_\_  
 Long-Term Care \_\_\_\_\_ Independent Living \_\_\_\_\_ Emergency Shelter Care \_\_\_\_\_

If the student is under court-order, provide the following information from the court-order. Letter from placing agency should be provided if available.

a) Who has custody? \_\_\_\_\_

Court order attached for dependency/Guardianship (not required except in cases of divorce/separation arrangements) YES \_\_\_\_\_ NO \_\_\_\_\_

b) Who has guardianship? \_\_\_\_\_

c) Who has educational rights? \_\_\_\_\_

3) Is the guardian receiving payment for providing home for child? YES \_\_\_\_\_ NO \_\_\_\_\_

4) Is the student in non-court ordered emergency shelter care? YES \_\_\_\_\_ NO \_\_\_\_\_

5) Is the student in an informal foster care setting? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, name the guardian: \_\_\_\_\_

Affidavit on file: YES \_\_\_\_\_ NO \_\_\_\_\_

# HOUSEHOLD INFORMATION

List all persons residing in the same household as the student registering (Brothers, Sisters)

Name	Birthdate
H	
C	
S	

List all other individuals residing in your household (grandparents, aunts, uncles, friends, etc.)

Name	Birthdate

## EDUCATIONAL INFORMATION - To be completed by Parent

- 1) What is the current educational placement grade for the student? 8<sup>th</sup>  
 Please provide copy of report card from most recent educational placement  
 Copy Attached: YES \_\_\_\_\_ NO \_\_\_\_\_
- 2) Is the student identified as a student with special needs and being served with an Individualized Education Plan? YES X NO \_\_\_\_\_
- 3) Date of most recent IEP \_\_\_\_\_ Copy Attached: YES \_\_\_\_\_ NO \_\_\_\_\_
- 4) Beginning with the most recent, list in order *all* previous schools that the student has attended:

Name of School District	Name of School	Approximate Date
Freeland elm	Hazleton	2006 - 2012

- 5) Has the student previously attended school in WASD? YES X NO \_\_\_\_\_
- If yes, list grade(s) 8<sup>th</sup>

# PARENT/GUARDIAN IDENTIFICATION AND RESIDENCY VERIFICATION

Identification must be presented at time of registration. Parents must provide driver's license, PA ID card, or Automobile Registration indicating district residence. Guardian must provide copy of legal guardianship with educational rights. If guardian does not have legal custody, the parent must be present to sign with identification.

Type of Identification: \_\_\_\_\_ Copy attached (Check One): YES \_\_\_\_\_ NO \_\_\_\_\_

The purpose of this request is to assure that the educational resources of the Weatherly Area School District are properly and legally allocated. Falsification of any information or document required for residence verification or the use of the address of another person may result in revocation of student enrollment. In addition to the above, at least one of the following document(s) must be presented:

deed, mortgage, lease agreement or moving permit	
utility bills (does not include cell phone bill)	
check stubs from wages, public assistance or social security	
payment or liability of payment of municipal and school district taxes	
Any other relevant documents asked for by administration	

Signature of Parent/Guardian C. R.

Signature of Agency Representative \_\_\_\_\_

Signature of Student \_\_\_\_\_  
(18 years or older/Emancipated)

Signature of Building Principal Andrea Sawica Date 4/3/20  
4/3/12

\* As per Mr. McLaughlin on 4/2/13, parent needed to complete registration document, as all other documents are on file.  
Leana Kelly